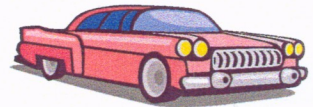




# membership application



Name

Spouse

Address

City / State / Zip

Phone (include area code)

Include in roster?  Yes  No

Email address

List the auto(s) that you would like to have included in the roster (include year, make, model and color)

T-Shirt Size (only one t-shirt per application)

Small  Medium  Large  X-Large  XX-Large

**Registration fee: \$30**

*Make check payable to W.P.S.S.C.C.*

*Dues expire on June 30 of each year.*

**Send application form and check to:**

Ed Cerra  
627 Fieldstone Dr.  
Apollo, PA 15613

*It is agreed that the W.P.S.S.C.C. nor any of its members shall be held responsible for any damages or injuries should they occur at any time or at any event held by the W.P.S.S.C.C.*

**Signature:**

**Date:**

**CLUB USE ONLY**

T-Shirt

Membership Card

Member Number

